

Application for Student Exchange Program to Chula Vista's Sister City Odawara, Japan

DESCRIPTION OF PROGRAM: Four Chula Vista students will be selected to go to Japan and stay with their respective Japanese student's family. During this time, they will participate in many activities in Odawara, such as: volunteer work, attending city council, sightseeing, etc. The Japanese students will arrange local transport and accompany students to many events. Chula Vista exchange students will present an overview of Chula Vista to the Odawara Council and commissioners. **After two weeks, the Japanese students will come and stay with the Chula Vista exchange students' families for two weeks.** Chula Vista students are expected to arrange local transport and accompany their Japanese student to as many events as possible. Events will be arranged by the IFC (International Friendship Commission). **Sometimes, due to unforeseen circumstances, students will not be able to stay with their student's family; likewise, the Japanese student may not be able to stay in the student's Chula Vista home. In this case, alternative host families will be provided. However, Chula Vista exchange students and their Japanese counterpart will still be expected to arrange transport and accompany each other to as many activities as possible.**

REQUIREMENTS:

Must possess a valid United States Passport.

Must be a resident of Chula Vista.

Must be between the ages of 18 and 25 and attending College or College bound.

Application **Must** include:

- **Copy of most recent Transcript (unofficial)**
- **Two (2) references: 1) From an Academic Source 2) From Employer or Community Organization**
- **Doctor's Certificate**
- **Host Family Application Form**
- **Essay**
- **Two (2) **NOTARIZED** Self Liability Release Forms**
- **Health Insurance Carrier and Policy Number**

INFORMATION:

Program in Japan is July 21 through August 4, 2008.

Program in Chula Vista is August 4 through August 18, 2008.

Application is due **NO LATER** than **March 7, 2008 by 3:00 p.m.**

Interviews will be held on: **March 15, 2008.**

\$500 travel stipend towards airfare will be provided by the IFC.

SUBMIT APPLICATION TO:

City of Chula Vista

International Friendship Commission, Attention Lilia Cesena

276 Fourth Avenue

Chula Vista, CA 91910

619-691-5044

Email: lcesena@chulavistaca.gov

APPLICATION
STUDENT EXCHANGE TO ODAWARA, JAPAN
(Chula Vista's Sister City)
Dates: July 21 through August 4, 2008

PRINT CLEARLY IN BLACK INK AND ATTACH THE REQUESTED ESSAY.
INCOMPLETE APPLICATIONS MAY NOT BE CONSIDERED.

Application deadline Friday, March 7, 2008

Date: _____

Name: _____ Date of Birth: _____ Age: _____

Address: _____

Telephone: (H) _____ (W) _____ (Cell) _____

Email: _____

School: _____ Year: _____ Full-Time ☐ Part-Time ☐

GPA (Min 3.0) _____ Major or Primary field of study: _____

ATTACH COPY OF YOUR MOST RECENT TRANSCRIPT

Language fluency: _____ (speak)____(read)____(write)____

_____ (speak)____(read)____(write)____

_____ (speak)____(read)____(write)____

Primary language spoken in your home: _____

ATTACH TWO LETTERS OF RECOMMENDATION:

- One from an **ACADEMIC SOURCE** (Counselor, Principal or Teacher)
- One from an **EMPLOYER** or **COMMUNITY ORGANIZATION**

(INCLUDE NAME, TITLE, TELEPHONE NUMBER, EMAIL)

Guardian/Father's Name: _____ Occupation: _____

Phone: _____ Email: _____

Guardian/Mother's Name: _____ Occupation: _____

Phone: _____ Email: _____

- A. Is there any health-related issue that would preclude you from participating in the Chula Vista International Friendship Commission student exchange program?

Yes ☐ No ☐

If yes, explain: _____

- B. Do you have any limitations that would preclude you from participating in any physical activity associated with the student exchange program (i.e. walking or prolonged sitting on an airplane)?

Yes ☐ No ☐

If yes, explain: _____

- C. PLEASE PROVIDE A DOCTOR'S CERTIFICATION THAT STATES THERE ARE NO PRECLUSIONS OR LIMITATIONS FOR YOU TO PARTICIPATE IN THE 2008 CHULA VISTA STUDENT EXCHANGE PROGRAM.**

ESSAY QUESTION

DIRECTIONS:

Submit a 2-3 page typewritten essay.
Include in your essay the following:

- Autobiographical information; including school and work activities, hobbies.
- Give a description of your family.
- Explain the reason you want to participate in this student exchange.
- Tell how you will benefit from this trip.
- Tell what expectations you have of Japan and Japanese people.
- Explain in what ways your participation would contribute toward understanding and friendship between the United States and Japan.
- Explain in what ways your participation would contribute toward understanding and friendship between Chula Vista and Odawara.

Host Family Application Form

Participant Information

Name: _____

Phone: (H)_____ (W)_____ (C)_____

Email: _____

Address:

(Street Number & Name) (Apt. Number)

(City) (State) (Zip Code)

Number of family members living in the household: _____

Gender and ages: _____

Names (first names only): _____

Primary language(s) spoken at home: _____

Family pets: _____

ACCOMMODATIONS:

Private room:_____ Private room with bathroom:_____ Shared room:_____

Shared room will be shared with: (family member's name): _____

Does anyone in your home smoke? _____

MEALS:

Family will provide...

Breakfast, lunch, dinner: _____

Breakfast, sack lunch, dinner: _____

Dinner only: _____

TRANSPORTATION:

- I, or my family am able to provide transportation in Chula Vista. Yes ☐ No ☐
- I have a valid US Driver's License. Yes ☐ No ☐
- I have valid vehicle insurance. Yes ☐ No ☐

SELF LIABILITY RELEASE

Student Exchange to Odawara, Japan

Name of Student: _____

Date of departure: _____

I expressly waive, release and discharge the City Of Chula Vista, its officers, agents, commissioners, and employees or any other person from any and all liability for any death, disability, personal injury, illness (including SARS), property damage, property theft or actions, including any alleged or actual negligent act or omissions, regardless of whether such act or omission is active or passive which may accrue to myself or members of my family or our heirs in connection with my participation in the above described trip.

I expressly indemnify and hold harmless the City Of Chula Vista, it's elected and appointed officers, agents and employees from any and all liabilities or claims made by me or my heirs as a result of, or in any way related to, or arising from, the trip identified herein, of my actions in connection with my participation in this trip except for those claims arising from the sole negligence or sole willful conduct of the City, its officers, commissioners, employees, volunteers or other representatives. Such indemnification includes liability settlements, damage awards, costs and attorney fees associated with any such claims.

DATE: _____

NAME: _____

SIGNATURE: _____

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DATE: _____

NAME: _____

SIGNATURE: _____

Signature of applicant will indicate understanding and compliance with the following prerequisites and conditions:

- a. Applicant is a resident of Chula Vista, CA.
- b. Applicant is a student attending college or is college bound.
- c. Applicant has a **valid** U.S. Passport.
- d. Student will be between the ages of 18 and 25 on the date of departure to Japan.
- e. If selected, applicant is responsible for his/her own personal expenses. While in Odawara, student will stay with a host family. Food, lodging and local transportation will be provided by the Host Family. (Flights to Japan are approximately \$700 to \$1,000 round trip.)
- f. All selected applicants must provide two (2) notarized Self Liability Release Forms.
- g. Applicant will provide his/her own medical insurance.
Insurance Carrier: _____ **Policy No.** _____
International travel insurance will be included with airfare.
- h. Applicant will provide his own medical inoculations as recommended and required by the Department of Public Health and own Physician.

Applicant's Signature: _____ Date: _____

Host Family Representative: _____ Date: _____

Odawara Castle

